

U.S. Department of Justice
United States Marshals Service**PROCESS RECEIPT AND RETURN**

See Instructions for "Service of Process by the U.S. Marshal" on the reverse of this form.

CH

PLAINTIFF	Develle Spencer - #2006-0097519	COURT CASE NUMBER	08 C 903 08c 903
DEFENDANT	Thomas Dart, etal.	TYPE OF PROCESS	Summons and Complaint
SERVE ➔	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN		
AT	Salvador Godinez, Director of Cook County Dept. of Corrections ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) 2600-2700 South California Avenue Chicago, IL 60608		

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW:

Develle Spencer - #2006-0097519
Cook County Jail
P.O. Box 089002
Chicago, IL 60608

Number of process to be served with this Form - 285

1

Number of parties to be served in this case

4

Check for service on U.S.A.

X

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available For Service):

Fold

FILED

Fold

MAY 13 2008

May 13 2008

MICHAEL W. DOBBINS

CLERK, U.S. DISTRICT COURT

Signature of Attorney or other Originator requesting service on behalf of:

XXX

☐ PLAINTIFF☐ DEFENDANT

TELEPHONE NUMBER

DATE

3-20-2008

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY — DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only first USM 285 if more than one USM 285 is submitted)	Total Process 2094	District of Origin No. 24	District to Serve No. 24	Signature of Authorized USMS Deputy or Clerk R.T.	Date 3-20-2008
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I hereby certify and return that I ☐ have personally served, ☒ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below)

Name and title of individual served (if not shown above)

Officer Ronna Farnandis

Address (complete only if different than shown above)

☐ A person of suitable age and discretion then residing in the defendant's usual place of abode.

Date of Service

5/08/08

Time

11:00

pm

Signature of U.S. Marshal or Deputy

Service Fee	Total Mileage Charges (including endeavors)	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marshal or	Amount of Refund
One	Service	fee charged	same case + location			

REMARKS:

See process sheet # 4 for Charges.